



Substitute House Bill No. 6537

Public Act No. 09-11

AN ACT CONCERNING THE LEGISLATIVE COMMISSIONERS' RECOMMENDATIONS FOR TECHNICAL REVISIONS TO THE PUBLIC HEALTH STATUTES.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

Section 1. Subsection (b) of section 14-253a of the general statutes is repealed and the following is substituted in lieu thereof (*Effective October 1, 2009*):

(b) The Commissioner of Motor Vehicles shall accept applications and renewal applications for special license plates and removable windshield placards from (1) any person who is blind, as defined in section 1-1f; (2) any person with disabilities which limit or impair the ability to walk, as defined in 23 CFR Part 1235.2; (3) any parent or guardian of any blind person or person with disabilities who is under eighteen years of age at the time of application; and (4) any organization which meets criteria established by the commissioner and which certifies to the commissioner's satisfaction that the vehicle for which a plate or placard is requested is primarily used to transport blind persons or persons with disabilities which limit or impair their ability to walk. Such applications shall be on a form prescribed by the commissioner and shall include certification of disability from a licensed physician, [physician's] physician assistant or advanced

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practice registered nurse, licensed in accordance with the provisions of chapter 378, or of blindness from an ophthalmologist or an optometrist. In the case of persons with disabilities which limit or impair the ability to walk, the application shall also include certification from a licensed physician, an advanced practice registered nurse, licensed in accordance with the provisions of chapter 378, or a member of the handicapped driver training unit established pursuant to section 14-11b that the applicant meets the definition of persons with disabilities which limit or impair the ability to walk, as defined in 23 CFR Section 1235.2. The commissioner, in said commissioner's discretion, may accept the discharge papers of a disabled veteran, as defined in section 14-254, in lieu of such certification. The commissioner may require additional certification at the time of the original application or at any time thereafter. If a person who has been requested to submit additional certification fails to do so within thirty days of the request, or if such additional certification is deemed by the commissioner to be unfavorable to the applicant, the commissioner may refuse to issue or, if already issued, suspend or revoke such special license plate or removable windshield placard. The commissioner shall not be required to issue more than one removable windshield placard per applicant. The fee for the issuance of a temporary removable windshield placard shall be five dollars. Any person whose application has been denied or whose special license plate or removable windshield placard has been suspended or revoked shall be afforded an opportunity for a hearing in accordance with the provisions of chapter 54.

Sec. 2. Subsection (a) of section 17a-210 of the general statutes is repealed and the following is substituted in lieu thereof (*Effective October 1, 2009*):

(a) There shall be a Department of Developmental Services. The Department of Developmental Services, with the advice of a Council

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on Developmental Services, shall be responsible for the planning, development and administration of complete, comprehensive and integrated state-wide services for persons with mental retardation and persons medically diagnosed as having Prader-Willi syndrome. The Department of Developmental Services shall be under the supervision of a Commissioner of Developmental Services, who shall be appointed by the Governor in accordance with the provisions of sections 4-5 to 4-8, inclusive. The Council on Developmental Services may advise the Governor on the appointment. The commissioner shall be a person who has background, training, education or experience in administering programs for the care, training, education, treatment and custody of persons with mental retardation. The commissioner shall be responsible, with the advice of the council, for: (1) Planning and developing complete, comprehensive and integrated state-wide services for persons with mental retardation; (2) the implementation and where appropriate the funding of such services; and (3) the coordination of the efforts of the Department of Developmental Services with those of other state departments and agencies, municipal governments and private agencies concerned with and providing services for persons with mental retardation. The commissioner shall be responsible for the administration and operation of the state training school, state developmental services regions and all state-operated community-based residential facilities established for the diagnosis, care and training of persons with mental retardation. The commissioner shall be responsible for establishing standards, providing technical assistance and exercising the requisite supervision of all state-supported residential, day and program support services for persons with mental retardation and work activity programs operated pursuant to section 17a-226. The commissioner shall stimulate research by public and private agencies, institutions of higher education and hospitals, in the interest of the elimination and amelioration of mental retardation and care and training of persons with mental retardation. The commissioner shall conduct or monitor

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investigations into allegations of abuse and neglect and file reports as requested by state agencies having statutory responsibility for the conduct and oversight of such investigations. In the event of the death of a person with mental retardation for whom the department has direct or oversight responsibility for medical care, the commissioner shall ensure that a comprehensive and timely review of the events, overall care, quality of life issues and medical care preceding such death is conducted by the department and shall, as requested, provide information and assistance to the Independent Mortality Review Board established by Executive Order No. 25 of Governor John G. Rowland. The commissioner shall report to the board and the board shall review any death: (A) Involving an allegation of abuse or neglect; (B) for which the Office of the Chief Medical Examiner or local medical examiner has accepted jurisdiction; (C) in which an autopsy was performed; (D) which was sudden and unexpected; or (E) in which the commissioner's review raises questions about the appropriateness of care. The department's mortality review process and the Independent Mortality Review Board shall operate in accordance with the peer review provisions established under section 19a-17b for medical review teams and confidentiality of records provisions established under section 19a-25 for the Department of Public Health.

Sec. 3. Subsection (e) of section 17a-215b of the general statutes is repealed and the following is substituted in lieu thereof (*Effective October 1, 2009*):

(e) The Commissioner of Developmental Services shall report, in accordance with section 11-4a, to the joint standing committee of the General Assembly having cognizance of matters relating to public health not later than January 1, 2009, concerning the results of such pilot program. The report shall include [.] recommendations concerning a system for addressing the needs of persons with autism spectrum disorder, including, but not limited to, recommendations (1)

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establishing an independent council to advise the Department of Developmental Services with respect to system design, implementation and quality enhancement, (2) establishing procedural safeguards, (3) designing and implementing a quality enhancement and improvement process, and (4) designing and implementing an interagency data and information management system.

Sec. 4. Section 19a-7l of the general statutes is repealed and the following is substituted in lieu thereof (*Effective October 1, 2009*):

On or before September 1, 2008, the Department of Public Health, in collaboration with the Department of Education, shall contact each local and regional board of education to make such boards aware of information concerning meningococcal meningitis. Such information shall include, but not necessarily be limited to, information related to the causes, symptoms and spread of meningococcal meningitis and vaccination information that reflects the current recommendations from the United States [Center] Centers for Disease Control and [Protection] Prevention. On and after September 1, 2008, the department shall periodically update the information provided to such boards concerning meningococcal meningitis.

Sec. 5. Subsection (a) of section 19a-36 of the general statutes is repealed and the following is substituted in lieu thereof (*Effective October 1, 2009*):

(a) The Commissioner of Public Health shall establish a Public Health Code and, from time to time, amend the same. The Public Health Code may provide for the preservation and improvement of the public health.

(1) Said code may include regulations pertaining to retail food establishments, including, but not limited to, food service establishments, catering food service establishments and itinerant food

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vending establishments and the required permitting from local health departments or districts to operate [said] such establishments.

(2) Drainage and toilet systems to be installed in any house or building arranged or designed for human habitation, or field sanitation provided for agricultural workers or migratory farm laborers, shall conform to minimum requirements prescribed in said code.

(3) Said code may include regulations requiring toilets and handwashing facilities in large stores, as defined in such regulations, in shopping centers and in places dispensing food or drink for consumption on the premises, for the use of patrons of such establishments, except that the provisions of such regulations shall not apply to such establishments constructed or altered pursuant to plans and specifications approved or building permits issued prior to October 1, 1977.

(4) The provisions of such regulations (A) with respect to the requirement of employing a qualified food operator and any reporting requirements relative to such operator, shall not apply to an owner or operator of a soup kitchen who relies exclusively on services provided by volunteers, and (B) shall not prohibit the sale of food at a noncommercial function such as an educational, religious, political or charitable organization's bake sale or potluck supper provided the seller maintains such food under the temperature, pH level and water activity level conditions that will inhibit the rapid and progressive growth of infectious or toxigenic microorganisms. For the purposes of this section, a "noncommercial function" means a function where food is sold by a person not regularly engaged in the business of selling such food.

(5) The provisions of such regulations with respect to qualified food operators shall require that the contents of the test administered to

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qualified food operators include elements testing the qualified food operator's knowledge of food allergies.

(6) Each regulation adopted by the Commissioner of Public Health shall state the date on which it shall take effect, and a copy of the regulation, signed by the Commissioner of Public Health, shall be filed in the office of the Secretary of the State and a copy sent by said commissioner to each director of health, and such regulation shall be published in such manner as the Commissioner of Public Health may determine.

(7) Any person who violates any provision of the Public Health Code shall be fined not more than one hundred dollars or imprisoned not more than three months, or both.

Sec. 6. Subsection (a) of section 19a-498b of the general statutes is repealed and the following is substituted in lieu thereof (*Effective October 1, 2009*):

(a) The Department of Public Health, [shall,] when conducting its annual survey of a nursing home that has admitted a resident or residents who have been administered a level two assessment, shall compare the services recommended for any such resident in the level two assessment with the actual services being provided to such resident as reflected in such resident's plan of care. The department shall include the results of any such comparison, as well as any regulatory violations found by the department during an inspection, in the survey of such nursing home.

Sec. 7. Subsection (a) of section 19a-637 of the general statutes is repealed and the following is substituted in lieu thereof (*Effective October 1, 2009*):

(a) In any of its deliberations involving a proposal, request or submission regarding (1) services provided by a health care facility or

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institution under section 19a-638; (2) capital expenditures by a health care facility under section 19a-639; and (3) the acquisition of equipment by a person, provider, health care facility or institution under section 19a-639, the office shall take into consideration and make written findings concerning each of the following principles and guidelines: The relationship of the proposal, request or submission to the state health plan pursuant to section 19a-7; the relationship of the proposal, request or submission to the applicant's long-range plan; the financial feasibility of the proposal, request or submission and its impact on the applicant's rates and financial condition; the impact of such proposal, request or submission on the interests of consumers of health care services and the payers for such services; the contribution of such proposal, request or submission to the quality, accessibility and cost-effectiveness of health care delivery in the region; whether there is a clear public need for any proposal or request; whether the health care facility or institution is competent to provide efficient and adequate service to the public in that such health care facility or institution is technically, financially and managerially expert and efficient; that rates be sufficient to allow the health care facility or institution to cover its reasonable capital and operating costs; the relationship of any proposed change to the applicant's current utilization statistics; the teaching and research responsibilities of the applicant; the special characteristics of the patient-physician mix of the applicant; the voluntary efforts of the applicant in improving productivity and containing costs; and any other factors which the office deems relevant, including, in the case of a facility or institution as defined in subsection (c) of section 19a-490, such factors as, but not limited to, the business interests of all owners, partners, associates, incorporators, directors, sponsors, stockholders and operators and the personal backgrounds of such persons. Whenever the granting, modification or denial of a request is inconsistent with the state health plan, a written explanation of the reasons for the inconsistency shall be included in the decision.

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Sec. 8. Section 20-126e of the general statutes is repealed and the following is substituted in lieu thereof (*Effective October 1, 2009*):

Each dentist licensed in this state who either makes or directs to be made a removable prosthetic denture, bridge, appliance or other structure to be worn in a person's mouth, shall offer to the patient for whom the prosthesis is to be made [] the opportunity to have such prosthesis marked with the patient's name or initials. Such markings shall be accomplished at the time the prosthesis is made and the location and methods used to apply or implant such markings shall be determined by the dentist or person directed to act on behalf of the dentist. Such marking shall be permanent, legible and cosmetically acceptable. A dentist shall advise the patient of any additional charges that may be incurred to obtain such markings on the prosthesis. Notwithstanding the provisions of this section, if in the professional judgment of the dentist or the entity that is making the prosthesis, such markings are not practicable or clinically safe, the identifying marks may be omitted entirely.

Approved May 4, 2009